



Charlotte-Mecklenburg Schools Construction

Request for Qualifications
MEP CxA Commissioning Services

August 2026

Contents

Section 1 - ADVERTISEMENT	1
Section 2 - INTRODUCTION AND OVERVIEW	1
Section 3 - GENERAL INFORMATION	1
Section 4 – MEP CxA COMMISSIONING SCOPE OF SERVICES	2
Section 5 - SUBMISSION REQUIREMENTS	4
Section 6 - INSURANCE REQUIREMENTS.....	5
Section 7 - QUALIFICATIONS/RESPONDER INFORMATION	6
Section 8 - ACKNOWLEDGEMENT FORM	8
Section 9 - CMS SMALL BUSINESS ENTERPRISE PROGRAM	

Section 1 - ADVERTISEMENT

Charlotte-Mecklenburg Schools (CMS) is requesting qualifications (RFQ) from MEP CxA Commissioning Service Providers interested in providing services for CMS Capital Improvement Program projects.

Documents may be downloaded beginning **Monday, August 3, 2026** at <https://www.cmsk12.org/operations/facilities-management/construction> under the Procurement section.

A virtual pre-proposal conference will be held at **3:00 pm on Thursday, August 13, 2026**. Details will be included in the RFQ.

Responses are due to CMS Auxiliary Services 3301 Stafford Drive, Charlotte NC **no later than 3:00 pm on Wednesday, August 26, 2026**. For further information email Tom O'Dell at tom.odell@cms.k12.nc.us.

Section 2 - INTRODUCTION AND OVERVIEW

CMS is soliciting responses from qualified firms interested in providing MEP CxA Commissioning services for the CMS Capital Improvement Program projects.

Section 3 - GENERAL INFORMATION

The selection of the MEP CxA Commissioning Service provider will be based on responder's qualifications and response to the RFQ. The selection committee will review and evaluate the RFQ responses and may select firms with or without interview.

A virtual pre-proposal conference will be held at **3:00 pm on Thursday, August 13, 2026**, via Teams at the following link > <https://teams.microsoft.com/meet/249812520205455?p=ohOy1lNgOX2UAnaT0n>

Meeting ID: 249 812 520 205 455 > **Passcode:** Dg2Uj3JB

Dial in by phone [+1 469-998-6045,363076094#](tel:+14699986045363076094)

Addenda and Supplements to RFQ

If a responder is in doubt as to the true meaning of any part of this RFQ or other requirements, questions may be submitted to CMS's representative no later than **Monday, August 17**. Clarifications or revisions to the RFQ will be made by addendum and will be posted on the CMS website >

<https://www.cmsk12.org/operations/facilities-management/construction>

under the Procurement section no later than **Wednesday, August 19**. It is the responder's obligation to monitor the website for addenda. Email questions regarding the RFQ to:

Mr. Tom O'Dell tom.odell@cms.k12.nc.us
Deputy Director of Capital Program Services
Charlotte-Mecklenburg Schools
3301 Stafford Drive
Charlotte, NC 28208

The responder is required to acknowledge receipt of any/all addenda.

Oral explanations will not be binding.

CMS has sole discretion and reserves the right to reject any and all RFQ responses received and to cancel the RFQ process at any time prior to entering into a formal agreement. CMS reserves the right to request additional information or clarification of information provided.

Section 4 – MEP CxA COMMISSIONING SCOPE OF SERVICES

The Commissioning scope of services extends from design through warranty phase. The objective is to ensure that the Mechanical, Electrical and Plumbing systems of each facility commissioned have been verified and documented to be complete and to fulfill the functional performance and maintainability requirements of the designer, building owner, occupants and building operators prior to building occupancy. Commissioning Services will include verification that the Owner's requirements are met throughout the design, construction, start-up and initial operation/warranty phases along with appropriate documentation of same.

During the design phase, it will be the Commissioning agent's responsibility to review designs to ensure the MEP CxA systems meet the Owner's requirements and to develop detailed commissioning specifications for the MEP CxA systems for inclusion in the bid documents.

During the construction phase, the Commissioning agent will develop and coordinate the execution plan for functional testing including observation and documentation of each system's performance to ensure systems are functioning in accordance with the contract documents and Owner's requirements.

In addition, the Commissioning agent will review O & M manuals for completeness as well as coordinating and reviewing training on system operation provided to the building operators to ensure each facility operates as intended.

DETAILED COMMISSIONING SCOPE OF WORK	
Design Phase	
(1)	At 100% DD MEP Cxa will receive a full set of HVAC, electrical and plumbing drawings and associated specifications as well as a copy of CMS current guidelines. The MEP Cxa will review the drawings and specs for intent and submit a report consisting of design intent related questions and clarifications within two weeks.
(2)	At the 50% CD submittal phase the MEP Cxa will develop and submit commissioning plans/specifications for review and incorporation into bid documents. MEP Cxa will also attend a meeting with the Engineers of Record and Design Manager to review the 50% comments.
(3)	At the 95% CD submittal phase the MEP Cxa will repeat the process noted in Design Phase item 1 above. MEP CxA will also provide a commissioning plan and schedule to be inserted into the 95% CD documents.
Pre-Bid Phase	
(1)	The MEP CxA will attend the pre-bid conference; introduce themselves and discuss their role in the construction process.
(2)	Submit a copy of the commissioning plan and explain the contractor's responsibilities in the commissioning process and the systems to be commissioned. Review the MEP CxA schedule and expected time durations of the HVAC functional performance testing in which the controls vendors will need to be on site as well as TAB and mechanical contractors.
Construction Phase	
(1)	Coordinate any modifications in the development of the construction schedule relating to commissioning with GC or CMAR.
(2)	Review major equipment submittals and compile all pertinent approved submittals from the A/E.
Field Verification	
(1)	All equipment will be verified in the field to comply with the contract documents and approved submittals. The MEP CxA shall verify that all approved equipment is in the proper locations.
(2)	All field connections to the equipment will be verified for proper connection.
(3)	Verify all accessories are installed.

Functional Performance Testing	
(1)	The MEP CxA shall supply to the HVAC, plumbing and electrical contractors the appropriate forms to be used for each piece of equipment. a) Pre-functional Checklists b) Functional Performance Test Forms Upon CMS approval, contractor field verification forms may be accepted assuming the forms provide the information being requested by the MEP CxA.
(2)	Verify accuracy of the functional performance forms from the MEP CxA contractors within two weeks of receipt.
(3)	MEP CxA will create a deficiency report.
HVAC	
(1)	The MEP CxA shall observe functional performance testing with the contractors, verify accuracy of the testing, and note any deficiencies for the contractor to correct.
(2)	The MEP CxA shall observe and verify 25% of all air and water devices balanced by the TAB contractor.
(3)	The MEP CxA shall verify point-by-point functional performance of all major HVAC systems (through the BAS/EMS graphics).
(4)	The MEP CxA shall observe and verify a sequence of operations for all major HVAC systems (through the BAS/EMS graphics).
(5)	The MEP CxA shall obtain authorization from CMS to have access to review the BAS/EMS graphics (remotely from their office).
(6)	The MEP CxA shall review the BAS/EMS systems remotely and determine if any significant changes have been made to the systems.
(7)	MEP CxA shall be on site as needed after the field verification phase has started and to attend the OAC meetings. The MEP CxA will be expected to facilitate commissioning efforts during these meetings as well provide an up-to-date deficiency log listing all issues and their status. MEP CxA will review the schedule and verify whether MEP CxA items and appropriate durations are included.
(9)	The MEP CxA shall verify airflow for 10% of grilles and diffusers are within tolerance of the drawings and compare with the test and balance report. more than 15% of the tested grilles are outside the tolerance the test and balance company shall rebalance and another 10% of grilles and diffusers shall be verified (cost to be charged to contractor).
Plumbing	
(1)	The MEP CxA will review/verify the domestic hot water system operates properly at all locations.
(2)	The MEP CxA will review/verify that all water closets and lavatories operate and function properly.
Electrical	
(1)	Sports lighting test reports (if applicable); review/verify complete.
(2)	Review/verify that the cleaning of light fixtures, lenses, lamps, equipment interiors, and electrical rooms has been completed.
(3)	Motor running tests – review/verify completion.
(4)	Transformer tests – review/verify completion.
(5)	N/A
(6)	Ground resistance test – review/verify completion.
(7)	Ground/neutral isolation test – review/verify completion.
(8)	TVSS – verify operational status.
(9)	Review/verify that the posting of the power riser diagram at switchboards has been completed.
(10)	NaCxAlates – review/verify completion.
(11)	Fire alarm system commissioning – do a complete functional performance test including interfaces with the HVAC system.
(12)	Review/verify posting of fire alarm system record drawings is complete.
(13)	Review/verify Intercom system test completion including interface with phone system.
(14)	Review/verify Security system walk test has been completed by CMS Security.
(15)	Review/verify Sound system commissioning/completion.
(16)	Review/verify 600-volt cable test reports are complete.
(17)	Verify light fixtures illuminate as designed and all lighting control systems function as designed.
(18)	Review/verify Feeder continuity and fault tests are complete.
(19)	CCTV personnel instruction – verify acceptance by CMS Telecommunications.

(20)	Verify circuit breaker interrupt ratings are per design.
(21)	Verify arc flash hazard analysis and labeling is complete.
(22)	Verify compression lugs are properly installed (aluminum feeders).
(23)	Verify exterior lights are functioning per design.
(24)	Verify the generator operates on a power loss including associated equipment.
(25)	Review/verify Lighting controls system including security integration and EMS are functioning per design.
(26)	Review/verify access control systems are functioning per design.
Close-out Review Phase	
(1)	Final Documentation
(2)	The MEP CxA shall review the GC or CMAR's closeout documents. This includes product data, owner's manual information and warranty documents for compliance with the contract documents.

Section 5 - SUBMISSION REQUIREMENTS

Responses should be prepared and submitted as described in this section.

Responders bear the responsibility of examining all parts of this RFQ and furnishing the information required by this RFQ. The responder shall prepare their response and provide two (2) hard copies and one (1) electronic copy on a labeled USB flash drive. All costs incurred in the preparation and submission of the response to this RFQ shall be covered by the responder. All blank spaces on the Acknowledgement Form and all requirements outlined in this RFQ must be completed.

Submittals shall be made on 8.5" x 11" paper, side bound with Table of Contents and reference tabs for key sections. Response is limited to 20 pages double sided excluding SBE forms, Insurance forms, Acknowledgement form, Table of Contents, reference tabs and covers. All pages are to be consecutively numbered. Responders shall submit their RFQ Response in a sealed envelope **no later than Wednesday, August 26 @3:00 pm** to CMS Auxiliary Services, 3301 Stafford Drive, Charlotte, NC and Attention: Tom O'Dell. The sealed envelope shall carry the following information on the face of the envelope: Responder's name, address and the words MEP CxA Commissioning Services RFQ Response.

Each responder must answer all questions and provide all requested information, where applicable. If the answer to any questions is "none" or if the question is not applicable, please state in writing. Any responder failing to do so may be deemed to be non-responsive with respect to this qualification at the sole discretion of CMS.

The responder is responsible for the delivery before the time specified, submittals received after the specified time will not be considered and will be returned unopened. Submittals must include, at a minimum, the following:

1. Executive Summary limited to one (1) page including the name of the responder, location of responder's principal place of business, and a brief description of the business. Summary should describe the responder's strengths and any special qualifications your firm may possess related to the project(s) described.
2. Insurance Requirements – Proposers must show proof of insurance coverage meeting the requirements identified in Section 6 (submit a copy of insurance certificate)
3. Completed response to Section 7 – Qualifications/responder Information
4. Completed Section 8 - Acknowledgement Form
5. Complete Section 9 - Required documents included with SBE Information

Section 6 - INSURANCE REQUIREMENTS

Minimum limits for the following types of insurance are required:

Worker's Compensation:

1. N.C. Statutory Requirements
2. Employers Liability
 - \$500,000 – Each Accident
 - \$500,000 – Disease Policy Limits (Aggregate)
 - \$500,000 – Disease Each Employee

Comprehensive General Liability:

Limits of coverage shall not be less than:

- | | |
|--|---|
| 1. Bodily Injury Liability including contractual liability coverage
Assumed under the indemnity agreement of the contract,
Products/completed operations and underground property
damage XCU where applicable. | \$1,000,000 each occurrence
\$2,000,000 annual aggregate |
| 2. Property Damage Liability including contractual liability
Coverage assumed under the indemnity agreement of the
Contract, products/completed operations and undergoing
Property damage XCU where applicable. | \$1,000,000 each occurrence
\$2,000,000 annual aggregate |

Comprehensive Automobile Liability:

Comprehensive Automobile Liability Insurance shall be maintained by the Construction Manager as to the Ownership, maintenance and use of all owned, non-owned, leased or hire vehicles with limits of not less than:

- | | |
|--|--|
| 1. Automobile Liability – All owned, non-owned and hired
vehicles | \$1,000,000 each person
\$2,000,000 each occurrence |
| 2. Automobile Property Damage Liability – all owned,
non-owned and hired vehicles | \$1,000,000 each occurrence
\$2,000,000 aggregate |
| 3. Umbrella liability limits shall not be less than | \$2,000,000 each occurrence |
| 4. Professional Liability Insurance | \$1,000,000 |

Section 7 - QUALIFICATIONS/RESPONDER INFORMATION

Please organize your responses to questions below in the same order and numbering given, restating the question first, then your response.

1. Company history, size and background
 - a. Provide current organizational structure information, date of company formation and the number of years providing MEP CxA Commissioning services.
 - b. Provide the total number of staff directly employed by the proposing office regularly engaged in MEP CxA Commissioning services. Provide an organizational chart that represents this staffing and their relationship to the organizational management structure.
 - c. Provide the annual revenue of the firm and the proposing office related to MEP CxA Commissioning services work over the last five (5) years including the number of projects per year.
 - d. Names of license holders and associated license numbers.
2. Provide a list of the projects over 50,000 sf that your proposing office currently has in progress including:
 - a. Name and Location of the project
 - b. Names of staff (Principal, Project Manager, Consultants)
 - c. Name, address and phone number for Owner's Representative
 - d. Square footage
 - e. Projected completion date
3. Provide a list of the projects over 50,000 sf that your proposing office has completed in the last 5 years including:
 - a. Name and Location of the project
 - b. Names of staff (Principal, Project Manager, Consultants)
 - c. Name, address and phone number for Owner's Representative
 - d. Square footage
 - e. Projected completion date
4. Financial Information - CMS reserves the right to request financial data. If requested provide a copy of audited financial statements for the three (3) previous fiscal years and the last quarterly report. Statements must include auditor's letter of opinion, auditor's noted balance sheet, statement of income/loss.
5. Provide a list of the proposed staff that will directly participate in this CMS work. Provide a resume for each key individual proposed for the project. Indicate the staff member that will serve as the continuous point of contact.
6. Describe your firm's experience utilizing Bluebeam software for review and incorporation of comments during the design and construction process.
7. Describe your firm's experience and approach to commissioning the HVAC and Building Automation System controls from the start of the design through the completion of the commissioning process.
8. Legal Information
 - a. Identify any judgments, claims, and suits pending or outstanding against your firm or its officers.
 - b. Indicate any project(s) where your firm has been terminated and the reasons for termination.
 - c. Has your firm or any of its owners, officers or partners ever been found liable in a civil suit, found guilty in a criminal action for making any false claim or material misrepresentation to any public agency or entity, or been convicted of a crime involving any federal, state or local law?

If YES, explain on a separate signed page, including identifying who was involved, the name of the public agency, the date of the investigation and the grounds for the finding.

- d. Respondents shall comply with CMS's SBE Program by making a good faith effort to utilize SBE firms. **Respondents must complete and include the forms listed in Section 9 (Identification form and Affidavit "A" or "B").**

9. Is your firm, by definition, a certified SBE?

10. Provide staff size for office proposed to perform the work.

- a. Number of Principals
- b. Number of office and field engineers
- c. Number of administrators
- d. Number of technicians

11. List firm's recent experience (last three years) in performing similar work.

- a. Has your firm worked on CMS projects? If so, when and in what capacity? Indicate the specific projects the firm provided services on.
- b. Has your firm provided MEP CxA Commissioning services for K-12 or higher education facilities in North Carolina? If so, identify the school districts, number of projects and scope of services provided.
- c. List three additional client references for which your firm provided MEP CxA Commissioning services.
- d. Does your firm or any business associate own any business or financial interest that would place the firm in a conflict of interest in either the design or procurement phase of the Capital Improvement Program.
- e. Describe any litigation, mediation or arbitration your firm has been involved in or has pending against the firm or any of its officers during the past five (5) years.
- f. Describe your firm's detailed approach to carrying out work, technologies used, and how projects will be handled.

Section 8 – ACKNOWLEDGEMENT FORM

The undersigned warrants that they are duly authorized to bind the Proposer.

The undersigned acknowledges receipt of addenda: _____

The undersigned agrees to be bound by and comply with the provisions of CMS's Small Business Enterprise Program.

I, the undersigned, certify and declare that I have read all the foregoing RFQ responses and know their contents. I declare under penalty of perjury under the laws of the State of North Carolina, that the foregoing is correct.

All signatures to be sworn to before a Notary Public

Signed _____ Firm Name _____

Title _____ Address _____

Telephone _____ City _____

State _____ Zip _____

Corporate Seal – (requested, not required)

SUBSCRIBED AND SWORN to before me this

_____ Day of _____ 19

Notary Public Signature

STATE OF _____

COUNTY OF _____

Section 9 – CMS Small Business Enterprise Program

To be issued through Addenda